

Natick Recreation and Parks Department

"Create Community through People, Parks and Programs"

To: Arrowhead Day Camp Volunteer Applicant

From: Camp Arrowhead Volunteer Coordinator

To be considered as a Camp Arrowhead Volunteer, **ALL** of the following information **MUST** be completed and submitted by Tuesday, April 29, 2014. Our volunteers work one on one with an assigned camper each week. Therefore, we have a limited space each week for volunteers. We expect to need between 35 - 40 volunteers each week. You will be notified by the end of May regarding your week assignments.

"Volunteer Application Form" filled out COMPLETELY by Applicant
"Volunteer Health Form" filled out COMPLETELY by Applicant.
Your MOST RECENT (within 2 years of requested sessions end) Physical and Immunization Form (computer printout from physician). Please confirm that your immunizations are current with you health care provider.
Completed Essay (First year applicants only.)
SORI and CORI Forms (State mandates you include last 6 digits of Social Security # where noted on CORI.)
MANDATORY PHOTO ID • <u>DO NOT</u> cut the ID/photo - please leave on 8-1/2 x 11 sheet.
The State has mandated that we require a Government issued Picture ID of all Volunteer's/CIT's and Staff.
(Ex: Drivers License, Passports, Student ID, Alien Reg. Card, Employment Author. Card, US Military ID Card)
* Please contact us if you have a question about acceptable ID's.

There will be a MANDATORY meeting for all *New* Arrowhead Volunteer Applicants at the Cole Center on Sunday, May 4 from 10:00 am to 12:00 noon.

Please answer the following essay questions on a separate piece of paper, in two to three paragraphs, and submit it along with the Volunteer Application form.

What experiences, if any, have you had that would be helpful in working with children and adults with special needs?

What qualities do you think you can bring to the program to make it better?

What do you want to get out of Camp Arrowhead this summer?

Please mark these important dates below on your calendar. Attendance is *mandatory* for volunteers.

- May 4 New Volunteer Meeting at Cole 10:00 am noon
- June 26 and 27 Training at Arrowhead for All Volunteers 10:00 am 3:00 pm

Please <u>keep this sheet</u> for MANDATORY meeting information.



Natick Recreation and Parks Department

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CAMP ARROWHEAD VOLUNTEER APPLICATION FORM

(Must be going into Grade 9 and above.)

Applications will NOT be accepted without a copy of your most recent Physical and Immunization Printout dated within 2 years from your requested camp end date and your completed Essay.

PLEASE NOTE: AS PART OF THE APPLICATION PROCESS,

Name		Telephone # ()					
Address							
Street E-Mail		Town	∑ip T-Shirt Size				
	Minimum 2 Week Availability Required						
		esired in order of preference.					
Dates	Pref.	Dates	Pref.				
Session 1 • June 30 - 3		Session 4 • July 2					
Session 2 • July 7 - 11		Session 5 • July 28					
Session 3 • July 14 - 18		Session 6 • Augus	_				
Residential Camp Week	*This is based on Volun	teers Performance recor	d at Day Camp and				
	previous Residential Ex	perience.					
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CAMP ARROWHEAD VOLUNTEER HEALTH FORM

General Information

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Health Plan/HMO:												
Policy or Group #:												
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"Create Community through People, Parks and Programs"

COMMONWEALTH OF MASSACHUSETTS SEX OFFENDER REGISTRY BOARD

REQUEST FOR SEX OFFENDER REGISTRY INFORMATION

All requests for sex offender information must be made on this form and mailed to the Sex Offender Registry Board, P.O. Box 4547, Salem, MA 01970, along with a self-addressed stamped envelope. The Board will provide a report that includes the following information: whether the person identified is a sex offender with an obligation to register, the offense(s) for which the offender was convicted or adjudicated, and the date(s) of the conviction(s) or adjudication(s). Please be advised that the law only permits the public to receive information on sex offenders required to register and finally classified by the Board as a level 2 (moderate risk) or level 3 (high risk) offender. Therefore, information is not available to the public if the identified individual is a level 1 (low risk) offender or if he/she has not yet been finally classified by the Board.

All requests shall be recorded and kept confidential, except to assist or defend in a criminal prosecution. Requestor's Name: Jonathan Marshall Address: ___ 1500 Worcester Road • #219 Framingham, MA 01702 I swear under the pains and penalties of perjury that I am the above-named person, at least 18 years of age, and I am requesting information for my own protection, the protection of a child under 18 years of age, or for the protection of another person for whom I have responsibility, care or custody. Requested by: Jonathan Marshall Jonathan Marshall, Director • NRPD

Signature of SORI Authorized Employee I hereby request that the following information be used to determine whether the individual identified below is a sex offender required to register in Massachusetts. ************ COMPLETED FORM MUST BE RETURNED TO THE RECREATION AND PARKS DEPARTMENT Date of Birth: _____/ Subject's Name: (*Please Use Actual (Legal) Given Name • NO NICKNAMES OR SHORTENED NAMES) Address: ___ Please DO NOT use PO Box Numbers Town, State and ZIP Personal Identifying Characteristics: Sex: _____ Race: ____ Height: ____ Weight: ____ Eye Color: ___ Hair Color: ____ Other Information (e.g. license plate number, parents' names, etc.): ______ ********WARNING******

SEX OFFENDER REGISTRY INFORMATION SHALL NOT BE USED TO COMMIT A CRIME OR TO ENGAGE IN ILLEGAL DISCRIMINATION OR HARASSMENT OF AN OFFENDER. ANY PERSON WHO USES INFORMATION DISCLOSED PURSUANT TO M.G.L. C. 6, §§ 178C – 178P FOR SUCH PURPOSES SHALL BE PUNISHED BY NOT MORE THAN TWO AND ONE HALF (2 1/2) YEARS IN A HOUSE OF CORRECTION OR BY A FINE OF NOT MORE THAN ONE THOUSAND DOLLARS (\$1000.00) OR BOTH (M.G.L. C. 6, § 178N). IN ADDITION, ANY PERSON WHO USES REGISTRY INFORMATION TO THREATEN TO COMMIT A CRIME MAY BE PUNISHED BY A FINE OF NOT MORE THAN ONE HUNDRED DOLLARS (\$100.00) OR BY IMPRISONMENT FOR NOT MORE THAN SIX (6) MONTHS (M.G.L. C. 275, § 4).

(NR&PD 1/14)



Natick Recreation and Parks Department

"Create Community through People, Parks and Programs"

OF	FICE ADMIN TO	FILL IN
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CHAPTER 6 § 172G CORI REQUEST FORM

Natick Recreation and Parks Department is requesting all the available criminal offender recorded information (CORI) and juvenile data on the following individual from the Criminal History Systems Board pursuant to Chapter 6 § 172G, which mandates operators of *camps* for children to request CORI and juvenile data regarding all employees or volunteers prior to employment or volunteer service.

A GOVERNMENT ISSUED PHOTO ID MUST ACCOMPANY THE CORI FORM.

Note: A drivers license, passport or school ID are all acceptable types of photos.

Please leave copied photo on an 8-1/2" x 11" piece of paper..... DO NOT CUT.

If no picture ID - A Birth Certificate will be accepted

CLASS PICTURES ARE NOT CONSIDERED GOVERNMENT ISSUED PHOTO ID'S

EMPLOYEE/VOLUNTEER INFORMATION (PLEASE PRINT IN INK - NOT PENCIL)

Last	Name (* Please Use	Actual (Legal) Gi	First No • iven Name		ES OR SHORTENE	Middle Name ED NAMES)		
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		Ple	ase DO NO1	use PO Boxes				
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Requested by:	-	<u>Marshall, Dúr</u> PRI Authorized Em		Jone	athan Marshall	<u>, Director • NRPE</u>)	
COMPLETED	FORM w/PHOTO	ID MUST BE R	ETURNED 1	O THE RECRE	ATION AND	PARKS DEPARTA	ΛENT	
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